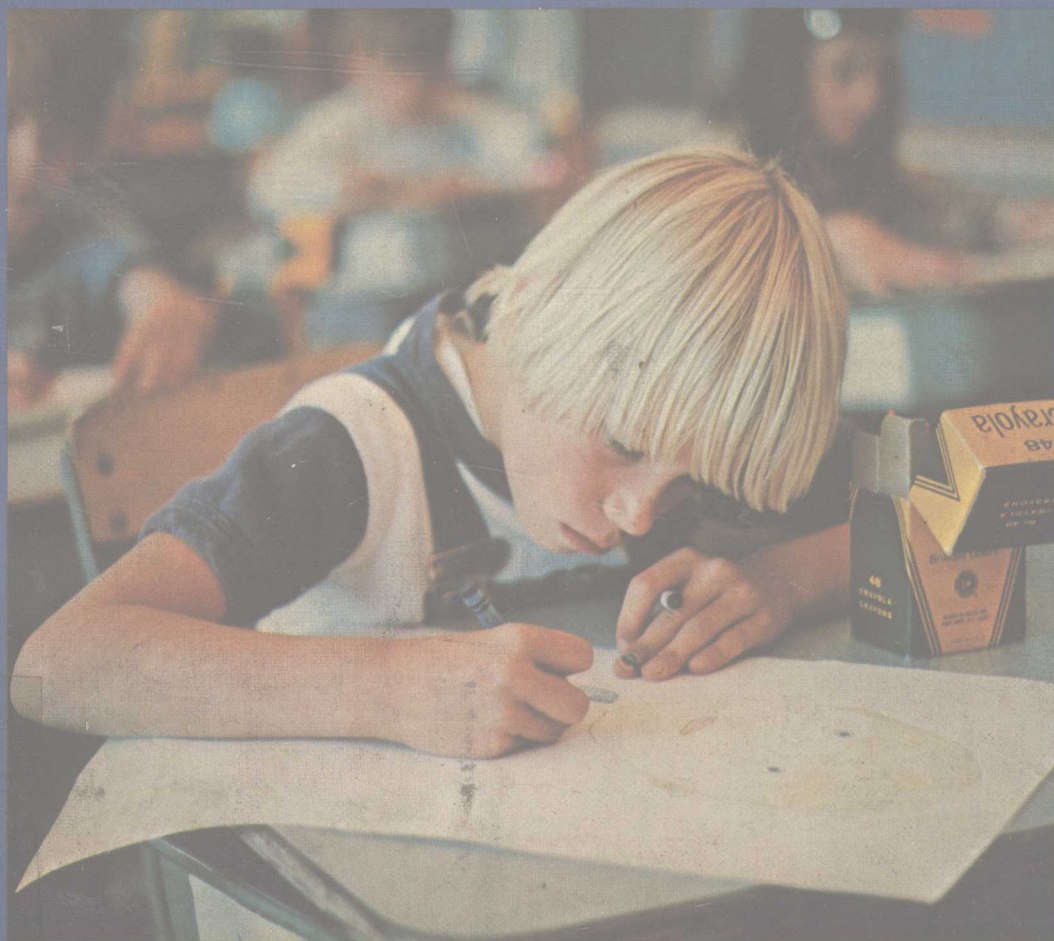


Teaching children and youth with behavior disorders

THOMAS M. SHEA



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THOMAS M. SHEA

Professor, Department of Special Education,
Southern Illinois University,
Edwardsville, Illinois

ILLUSTRATED



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Teaching children and youth
with behavior disorders

To
Dolores
my wife and best friend

Preface

Recently I was speaking with a friend about the anxieties and frustrations inherent in teaching children and youth with behavior disorders. This friend is a teacher of behavior-disordered adolescents. She related the following incident that occurred during an individual instruction session with Carl, a 14-year-old student.

"Carl and I had been working on a mathematics lesson for about 15 minutes. During this time Carl remained calm, cool, and collected, effectively ignoring all my attempts to motivate him and engage him in the problems at hand.

"Finally, in a state of utter exasperation, I said, 'Come on, Carl, get with it. It would not hurt you one little bit to help me and be just a little more cooperative.'

"Carl looked at me with astonishment and said, 'Mrs. Foley, no one ever told you that teaching kids like me was going to be easy.'"

Carl was right. Our work is difficult, frustrating, and extremely complex. It requires professionals who are dedicated and concerned about others and who are able to give of themselves. It is important work, from which the teacher can derive much satisfaction and joy.

As this text demonstrates, there are no simple formulas to apply that will magically or miraculously rehabilitate the children and youth who are the subject of

our efforts. *Teaching Children and Youth with Behavior Disorders* is a summary of progress thus far in the effort to help special children.

This text is primarily about prescriptive teaching methods as they apply to children and youth with behavior disorders and as they apply to their parents.

Section One introduces the reader to the problems and characteristics of the children and youth about whom this book is written. Chapter 1 reviews current definitions and population variables, such as age, sex, grade, cultural background, incidence, persistence, and so on. Chapter 2 is a taxonomy of cognitive, affective, and psychomotor behaviors frequently observed by the teacher in the educational setting. Each behavior is described and exemplified. Suggestions and references for treatment drawn from the literature are presented.

Section Two focuses on screening or identification and diagnostic evaluation processes (Chapter 3) and on the services needed by children and youth with behavior disorders (Chapter 4).

In Section Three attention is directed to the teaching-learning process. Chapter 5 is a review of several strategies for teaching children and youth with behavior disorders. The material in this chapter is taken from the current special education literature. Chapter 6

is a detailed presentation of a prescriptive teaching method that was developed and implemented, together with colleagues and students, in a variety of special education instructional settings. In Chapter 7 the roles and functions of instructional personnel are discussed.

Section Four is a review of two topics of crucial importance to the special education teacher: parent education and training, and behavior management. In Chapter 8 a prescriptive parent programming model is presented. This parent education and training model was developed for teacher implementation with the parents of exceptional children. Chapter 9 is concerned with behavior management techniques derived from psychodynamic and environmental theories. Chapter 10 focuses on behavior management techniques derived from biophysical and behavioral theories.

This text is not my work alone, but a synthesis of the contributions of hundreds of practitioners, researchers, and authors. I have attempted to acknowledge their contributions in the extensive references at the conclusion of each chapter. To any persons I have neglected, I extend my apologies. The oversight is unintentional.

I would like to acknowledge the many friends, colleagues, students, and children who assisted in many ways in the writing of this text.

I am especially indebted to Dr. J. E. Walker, who assisted with the preparation of the original outline of the text and drafted several chapters. Thanks to Dr. W. R. Whiteside for his advice and assistance in locating many of the difficult-to-locate references. The assistance of Mrs. R. W. Egan in designing and organizing the prescriptive parent programming model presented in Chapter 8 is acknowledged.

My thanks is extended to the faculty and staff of Southern Illinois University and to the children and youth who participated in the Day School for Emotionally Disturbed Children, the Special Education Center, and the various special camps at which the prescriptive teaching model presented in Chapter 6 was developed and implemented.

My very special thanks to Mrs. J. Wildhaber, who typed and retyped the manuscript with a smile.

Finally, thanks to my wife, Dolores, to whom this text is dedicated, and to my sons, Kevin and Keith, for their patience and encouragement.

Thomas M. Shea

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POPULATION AND PROBLEMS

Section One (Chapters 1 and 2) focuses on the population of children and youth of primary concern in this text.

Chapter 1 is an overview of the characteristics of the population classified as behavior-disordered children and youth. In this chapter the reader is introduced to two important federal laws having significant implications now and for the future concerning the education of exceptional children. In addition, the incidence and persistence of behavior disorders as well as the age, sex, intelligence, and educational retardation of the behavior-disordered child or young person are discussed.

The final section of Chapter 1 is an overview of the behavioral, biophysical, environ-

mental, and psychoanalytic-psychodynamic theories of behavior and their implications for the education of behavior-disordered children and youth.

To assist the reader in defining, clarifying, and remediating learning problems frequently manifested by behavior-disordered children and youth in the educational setting, a taxonomy of learning problems is included in Chapter 2. Each learning problem is defined, described, and exemplified. Specific suggestions for remediating each learning problem are presented. These recommendations are supplemented by several references for further study at the conclusion of the discussion of each item in the taxonomy.

1

An introduction to children and youth with behavior disorders

On February 5, 1963, John Fitzgerald Kennedy, the thirty-fifth President of the United States, sent to the eighty-eighth Congress and the nation a message that was to have a significant impact on the education of behavior-disordered children and youth. His message included several proposals designed to assist in the nation's battle against mental illness and mental retardation.

Of these national problems Kennedy (1963) said:

These two afflictions have long been neglected. They occur more frequently, affect more people, require more prolonged treatment, and cause more individual and family suffering than any other condition in American life.

It has been tolerated too long. It has troubled our national conscience, but only as a problem unpleasant to mention, easy to postpone, and despairing of solution. The time has come for a great national effort. New medical, scientific, and social tools and insights are now available. (p. 137)

The time had arrived for a national effort; Congress passed and the President signed into law Public Law 88-164. This law is primarily concerned with training professional personnel to work with the handicapped, including children and youth with behavior disorders.

Another and equally important milestone in the education of behavior-disordered children and youth, as well as others with handicapping conditions, was reached on November 29, 1975. On that date, President Gerald R. Ford signed Public Law 94-142 (Education for All Handicapped Children Act of 1975), which in a bipartisan effort was passed by both the House of Representatives and the Senate by overwhelming margins (404 to 7 and 87 to 7, respectively). This important law mandates that throughout the United States *a free, appropriate public education be provided for all handicapped children*.

Congress emphasized the key elements of Public Law 94-142 with the words *free*, *appropriate*, *public*, and *all*. It was the intention of Congress that *all* handicapped children receive an education regardless of their race, religion, sex, or the characteristics of their unique handicap. They are to receive an education that is *appropriate* to their individual needs. This education is to be *free* (without cost) to the child or his parents or guardian. Finally, the handicapped child's *free, appropriate* education is to be provided by the *public* school system rather than in private schools or institutional settings.

This bill was passed into law because Con-

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gress found during its investigations and deliberations that:

- (1) there are more than eight million handicapped children in the United States today;
- (2) the special educational needs of such children are not being fully met;
- (3) more than half of the handicapped children in the United States do not receive appropriate educational services which would enable them to have full equality of opportunity;
- (4) one million of the handicapped children in the United States are excluded entirely from the public school system and will not go through the educational process with their peers;
- (5) there are many handicapped children throughout the United States participating in regular school programs whose handicaps prevent them from having a successful educational experience because their handicaps are undetected;
- (6) because of the lack of adequate services within the public school system, families are often forced to find services outside the public school system, often at great distance from their residence and at their own expense;
- (7) developments in the training of teachers and in diagnostic and instructional procedures and methods have advanced to the point that, given appropriate funding, State and local educational agencies can and will provide effective special education and related services to meet the needs of handicapped children;
- (8) State and local educational agencies have a responsibility to provide education for all handicapped children, but present financial resources are inadequate to meet the special educational needs of handicapped children; and
- (9) it is in the national interest that the Federal Government assist State and local efforts to provide programs to meet the educational needs of handicapped children in order to assure equal protection of the law. (Public Law 94-142, Section 3[b])

The purpose of Public Law 94-142 is

... to assure that all handicapped children have available to them ... a free appropriate public education which emphasizes special education and related services designed to meet their unique

needs, to assure that the rights of handicapped and their parents or guardians are protected, to assist States and localities to provide for the education of all handicapped children, and to assess and assure the effectiveness of efforts to educate handicapped children. (Public Law 94-142, Section 3 [c])

Practitioners of special education throughout the United States accepted the congressional mandates of Public Law 88-164 and have made significant progress in the education of behavior-disordered children and youth since 1963. They are continuing their efforts to assist handicapped children under the mandates of Public Law 94-142.

In this text many facets of the growth and development of special education for the emotionally disturbed since its formal beginnings in approximately 1950 are discussed. Included are a multitude of proposals and recommendations designed to assist in the efforts of special educators to provide "a free appropriate public education for all handicapped children."

In this chapter normal and deviant behaviors and several definitions of emotional disturbance from the literature are discussed, as well as the variables related to emotional disturbance, such as prevalence, persistence, sex, age, and intelligence.

Four theoretical perspectives of the causation of behavior disorders are overviewed briefly. These perspectives include the behavioral, biophysical, environmental, and psychoanalytic-psychodynamic points of view.

DEFINING BEHAVIOR DISORDERS

Normal problems of development

Redl (1965) stated that "it makes a great difference whether we talk about the 'emotionally disturbed child' or about behavior which indicates 'a state of emotional disturbance'" (p. v). This suggests that individuals perceived as "normal" have periods in their lifetime during which, under certain environmental conditions, they could be classified as "emotionally disturbed." It appears to be normal (not unusual) for human beings to have periods that are characterized by crisis,

conflict, depression, and stress. At these times the individual manifests bizarre or socially unacceptable behaviors similar to the behaviors exhibited by persons classified as emotionally disturbed.

As discussed in depth in Chapter 2, several characteristics of a behavior syndrome must be evaluated before the label "emotionally disturbed" is affixed to an individual. These variables are the frequency, intensity, duration, and type or kind of behavior exhibited by the individual. The setting, including the persons within it, in which the individual is exhibiting the unacceptable behavior must be analyzed during the assessment process.

MacFarlane, Allen, and Honzik (1954) reported the findings of a longitudinal study of the developmental problems of normal children. This study began in 1928 in Berkeley, Calif. The researchers selected every third child born in that city between January 1, 1928, and June 30, 1929, or a total of 252 boys and girls. The children were randomly divided into two study groups (a guidance group and a control group) of 126 members each.

Open-ended interviews were conducted by the researchers with each subject's mother between the child's twenty-first month and fourteenth year of life. Eighty-six of the original control group children remained available to the researchers throughout the period of the study.

MacFarlane and associates analyzed four developmental problem categories: (1) biological functioning and control (enuresis, insufficient appetite); (2) motor manifestations (thumb-sucking, overactivity, nail-biting); (3) social standards (negativism, lying); and (4) personality patterns (overdependence, excessive reserve).

At each of the 14 age levels between the twenty-first month and fourteenth year of life, one third or more of the control group children exhibited behavior problems.

It can be concluded from this and similar, though less extensive, research efforts (Johnson, Wahl, Martin, and Johansson, 1973; Lapouse and Monk, 1958; and Werry and Quay, 1971) that behavior problems are a

common manifestation of the growth and developmental pattern of normal children. Sheehy (1976) demonstrated in a recent study that this behavior problem pattern continues into and throughout adult life.

In their discussion of various efforts to define normality and deviancy, Clarizio and McCoy (1976) suggest the application of several criteria to evaluate definitions of emotional disturbance and normality. These criteria are the individual's developmental level, sex, the culture and subculture in which the individual functions, and the tolerance level of the adults associated with the child.

The assessment conducted before diagnosis must be multidimensional, including an assessment of the intellectual, social, personal, and physical domains of development. In addition, consideration must be given to the child or young person's unique individuality.

Thus, as a result of various research efforts, practitioners are cautioned to proceed with care during assessment and diagnostic processes. It appears that individuals generally perceived as "normal" could be mistakenly diagnosed and labeled "abnormal" or "deviant" at certain developmental stages or under certain environmental conditions.

Selected definitions of behavior-disordered children and youth

There appears to be as many definitions of behavior-disordered children and youth as there are authors to write them and purposes for writing them. Each of the definitions discussed here appears to be determined in part by (1) the discipline of the author (physician, attorney, psychiatrist, psychologist, educator); (2) his theoretical perspective (behavioral, psychodynamic, biophysical); and (3) his purpose for writing the definition.

According to Reinert (1972), the phrase "emotionally disturbed" appeared in the professional literature in approximately 1900. It appeared without a precise definition. Since then, many efforts have been made to write a precise definition of this phrase as it relates to children and youth.

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The term “emotionally disturbed” has been superseded by a variety of other labels designed to clarify its intent during the past three quarters of a century. Among the most widely used and recognized ones are:

- Maladjusted
- Socially maladjusted
- Seriously emotionally disturbed
- Adjustment problems
- Mentally ill or sick
- Mentally disturbed
- Educationally handicapped
- Predelinquent
- Delinquent
- Emotionally handicapped
- Socially handicapped
- Children in conflict
- Behavior disordered

One of the first widely accepted definitions of emotional disturbances in children was offered by Lambert and Bower (1961):

... the emotionally handicapped child is defined as having moderate to marked reduction in behavioral freedom, which in turn reduces his ability to function effectively in learning or working with others. In the classroom, this loss of freedom affects the child's educative and social experiences and results in a noticeable susceptibility to one or more of these five patterns of behavior:

1. An inability to learn which cannot be adequately explained by intellectual, sensory, neuro-physiological, or general health factors . . .
 2. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers . . .
 3. Inappropriate or immature types of behavior or feelings under normal conditions . . .
 4. A general pervasive mood of unhappiness or depression . . .
 5. A tendency to develop physical symptoms, such as speech problems, pains, or fears, associated with personal or school problems.
- (p. 2)

This definition was written for use in the development of an in-school screening procedure for emotionally disturbed children in California. Consequently, it does not deal with causation except by exclusion; that is, the behavior cannot be explained by intellectual, sensory, neurophysiological, or general health factors. The definition was written

for application by the regular class teacher during the screening process. Lambert and Bower's in-school screening process is discussed in detail in Chapter 3.

In connection with their project to demonstrate the effectiveness of various classroom programs in the education of emotionally disturbed children, Haring and Phillips (1962) offered the following definition of these children:

... children who have more or less serious problems with other people—peers and authority figures such as parents and teachers—or who are unhappy and unable to apply themselves in a manner commensurate with their abilities and interests. In general, one might say that an emotionally disturbed child is one who has a sizable “failure pattern” in living instead of a “success pattern.” (p. 1)*

The focus of Haring and Phillips's experiment was on the provisions of needed classroom structure and orderliness for emotionally disturbed students. This important project is discussed in detail in Chapter 5.

Hewett (1968) presented the following definition of the emotionally disturbed child:

The emotionally disturbed child is a socialization failure . . . his behavior, for whatever reason, is maladaptive according to the expectations of the society in which he lives. . . . As an individual's behavior deviates from what is expected for his age, sex, and status it is *maladaptive* and he may experience serious difficulties in getting along. (p. 3)

Hewett's definition is not classroom or school bound and focuses attention on the child's manifest behavior rather than on causation. This is one of the first definitions of the emotionally disturbed child to express the importance of age, sex, status, and societal expectations.

Hewett's definition was written in connection with his work at the University of California, Los Angeles, and the Santa Monica (California) Unified School District. Hewett's Madison School Plan and engineered

*From *Educating emotionally disturbed children* by N. G. Haring and E. L. Phillips. Copyright 1962 by McGraw-Hill Book Co. Used with permission of McGraw-Hill Book Co.

classroom design are discussed in Chapters 4 and 5.

Using a social learning theory and behavior modification approach to the education of behavior-disordered children, Woody (1969) defined the emotionally disturbed child as one "who cannot or will not adjust to the socially acceptable norms of behavior and consequently disrupts his own academic progress, the learning efforts of his classmates, and interpersonal relationships" (p. 7).

As suggested by Woody, the emotionally disturbed child presents the teacher with a variety of behavior problems that must be controlled if the child is to be a successful achiever and person.

These children, either because of intrapsychic conflict or social learning handicaps, have difficulty:

1. Accepting themselves as individuals worthy of respect
2. Interacting with peers in a consistently acceptable and personally productive manner
3. Interacting with authority figures, such as . . . teachers, instructors, and parents, in a consistently acceptable and personally productive manner
4. Engaging in "normal" affective, psychomotor, and cognitive learning activities without inordinate frustration and conflict (Shea, 1977, p. 6)

Hewett and Forness (1974) offered a definition of the emotionally disturbed child that focused attention on the child's classroom functioning: "In the classroom, a child who is inattentive, withdrawn, or nonconforming to such a degree that he consistently fails to meet the expectations of the teacher and the school is a likely candidate for the label 'emotionally disturbed'" (p. 58). The emphasis here is on "the expectations of the teacher and the school." With this definition Hewett and Forness demonstrate the importance of the observer (teacher) in the assessment process.

Smith and Neisworth (1975) approached the problems of maladjusted children from another perspective:

There are two very broad categories of adjustment problems: emotional disturbance and social mal-

adjustment. Almost everyone experiences instances of maladjustment in his lifetime. These transitional problem periods are normal if they are relatively brief and infrequent. They may very well be situation-specific, that is, related to a certain trying or disturbing event, place, or person. Hence, there is no clear line of demarcation between normal and abnormal personal-social behaviors. "Emotional disturbance" is a general term that is used to include numerous imprecisely defined conditions such as "mental illness," "psychosis," "neurosis," "schizophrenia," "phobia," "obsession," "compulsion," "autism," and so on. Each of these categories of disturbance has characteristics that separate it from the others. Fundamentally, children who exhibit emotionally disturbed behaviors are excessively aggressive, withdrawn, or both. Their central problem usually is not violation of social rules or the mores and folkways of the culture; they are, however, usually very unhappy people.

Social maladjustment, in contrast, involves behavior which violates rules. The behavior may be acceptable within the context of the child's subculture, but not in society at large. In fact, within the child's immediate social milieu rule-violating behavior (e.g., throwing stones at school windows) may be rewarded. (pp. 26-27)*

The importance of Smith and Neisworth's definition of adjustment problems lies in the emphasis on a recognition that all people have adjustment problems at various times in life and a recognition of the importance of specific events, places, and persons on behavior.

Avoiding the use of any of the available definitions, Reinert (1976) referred to emotionally disturbed, behavior-disordered, and/or mentally ill children as "children in conflict." According to Reinert's definition, a child in conflict is one "whose manifest behavior has a deleterious effect on his personal or educational development and/or the personal or educational development of his peers. Negative effects may vary considerably from one child to another in terms of severity and prognosis" (p. 6).

Currently over 30 states and common-

* From *The exceptional child: a functional approach* by R. M. Smith and J. T. Neisworth. Copyright 1975 by McGraw Hill Book Co. Used with permission of McGraw Hill Book Co.